



City of Norman
Youth Council Application

Name: _____

Address: _____

Home Phone: _____ Cell Phone: _____

Email Address: _____

School: _____ Grade (Current Year): _____

Ward: _____

Parent Name: _____ Contact No: _____

Parent Name: _____ Contact No: _____

Why do you want to serve as a member of the Youth Council?

What are the three most important issues to you, your friends and your family concerning your neighborhood?

1. _____
2. _____
3. _____

What personal skills and characteristics do you possess that would make you a good representative?

If you could bring one thing to this city or change one thing, what would it be?

Letters of Recommendation: Obtain two letters of recommendation from adults who are familiar with your leadership, community service or interest in local government, such as a teacher, counselor, employer, minister, youth group leader, family friend, coach, or club advisor. Your references should indicate the length of time they have known you, how serving as a Youth Councilor would benefit you, and the strengths you can bring to the Youth Council of Norman. Include the letters of recommendations with your application.

Completed applications may be mailed to City of Norman, City Attorney's Office, P.O. Box 370, Norman, OK 73070. Questions concerning the Youth Council may be directed to Jeanne Snider at 366-5422 or jeanne.snider@normanok.gov or Deedra Vice at 366-5422 or deedra.vice@normanok.gov.